## Foster Family Home - Corrective Action Report

1-518441-5

Review ID:

Provider ID:

Home Name:

1-518441

Franco Estabillo, CNA

94-483 Hoaeae	Street		Reviewer:	Sue Lo		12/2017
Waipahu	Н	96797	Begin Date:	6/20/2017	End Date:	3/3/2017
Foster Family	/ Home R	equired Certific	ate	[1]	7-1454-6]	
6.(d)(1) Comment:	Comply with	all applicable requ	irements in this ch	apter; and	00 th 30 th 40 th 40 th 40 th 40 th	
6 (d)(1) Home	visit made on 6 on plan due to 0	/20/2017 for a 3 CTA on 7/20/201	-bed recertification	on. Corrective a	ction report i	ssued during home visit with
6 (d)(1) see ap	pplicable section	s of this review.				
Foster Family	y Home B	ackground Ch	ecks	[1	7-1454-7.1]	
7.1.(a)(1) Comment:	and and and and tell one wip and we are one out too the ori	** ** ** ** ** ** ** ** ** ** ** ** **	ecord checks in ac	ne hat die 300 TSL del wer hat Zie 300 TSP del del de	ction 846-2.7,	HRS;
7.1.(a)(1) Sec	ond sets of finge	erprinting not pre	esent in the home	e for CG#3.		
Foster Famil	y Home F	ire Safety		[1	7-1454-45]	
45.(b)(2) Comment:	A3 NO		SM (BV MB) 3M 3M 3M 3M 8B 8B 8B 8B 8B 8B 8B	66. 69 60 AZ 22 M 50 AZ 28 W 97 79 87 P	***************************************	es in the event of a fire.
45.(b)(2) Doc	umentation for to	raining and cond	lucting appropria	te emergency p	procedures in	the event of a fire not present
the nome to	<i>OO#0.</i>					
	Complian	aco Manager	<b>"</b>		- <del>-</del>	6/20/2017 ate
	ata	lice Manager				6/20/2017
Page 1 of 1	Primary (	Care Giver			D	ate 6/20/2017 21:02
rayeron						

WRITTEN PLAN OF CORRECTION 8-2-17

7.1(a).4) CG#3 NOT AMENERING PHONE CALL UNable TO OBTAIN SECOND FINGER PRINTING CG#3 THEREPORE REMOVAL 7-17-17. FROM NOW OWN THE HOME WILL MAKE SUPE THE NEW CG IS RESPONSIBLE TO MEET W/ THE REQUIREMENT.

415 (b)(2) CG #3 WAS NOT AVAILABLE TO CONDUCT FIRE PAILL BEGAUSE CAN'T CONTACT HER.

THE HOME APPLY FOR A NEW CG WHO IS MORE REVAILE TO CONDUCT FIRE PRILL AND OBTAIN ALL THE REQUIREMENT FOR THE HOME.

FRANCO B. ESTABILLO 94-483 HOATAE ST. WALPAHU HO 96797